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(Re	equestor's Name)				
(Ac	dress)				
(Ac	dress)				
(City/State/Zip/Phone #)					
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Top Computers, LLC		
Name of Lim	ited Liability Cor	npany
The enclosed Statement of Revocation of Dissolution submitted for filing.	for Florida Limit	ed Liability Company and fee(s) are
Please return all correspondence concerning this matte	er to:	
Haim Hazan		
Contact Person		_
Top Computers, LLC		
Firm/Company	·	_
1535 N. Maitland Ave		
Address		_
Maitland, FL 32751		
City, State and Zip Code	-	_
haim.h@ansol.co.il		_
E-mail address: (to be used for future annual repo	rt notification)	
For further information concerning this matter, please		
Haim Hazan	at (407 Area Code	2335418 _)
Name of Contact Person	Area Code	Daytime Telephone Number
STREET ADDRESS: Registration Section		MAILING ADDRESS: Registration Section
Division of Corporations		Division of Corporations
Clifton Building		P. O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301		Tallahassee, FL 32314

STATEMENT OF REVOCATION OF DISSOLUTION FOR FLORIDA LIMITED LIABILITY COMPANY

Pursuant to section 605.0708, Florida Statutes, this Florida limited liability company revokes its articles of dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the articles of dissolution.

1.	Top Computers, LLC The name of the company is:		
2.	The document number of the company is		
3.	The effective date the Dissolution was filed is		
4,	The revocation of dissolution was authorized on		
5.	A copy of the Articles of Dissolution is attached.		-1
	Signature of person authorized to submit the revocation of dissolution		
	Filing Fee: \$100.00 Certified Copy: \$30.00 (optional)	•	549